

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



Administrative Issuance: CFSA-10-15

TO: All CFSA and Private Agency Staff

FROM: Debra Porchia-Usher, Deputy Director for Agency Programs

DATE: December 30, 2010

RE: Transition Planning for Youth

The Child and Family Services Agency (CFSA) and its contracted private agency partners are committed to preparing youth (at age 15) for the transition to young adulthood, and to empowering youth from age 17 to their 20th birthday to plan and ensure a successful transition on their 21st birthday to their adult futures. The goal of this preparation process is to encourage and educate young adults to think beyond today and to envision their tomorrow with vigor and focus.

Through the Agency's Office of Youth Empowerment (OYE), each youth is provided with opportunities to master an array of skill sets useful for a successful transition from the foster care system. During this process, CFSA ensures that the youth are supported by a team of individuals that will help plan for the transition and collectively determine the services that are best suited for each individual path to self-sufficiency.

This administrative issuance outlines the procedures for transition planning prior to and after the 18th birthday of youth who are currently in the custody of CFSA. If you have any questions about this issuance, please contact the Office of Youth Empowerment.

General Considerations

CFSA shall begin preparing youth for young adulthood with the Ansell-Casey Life Skill Assessment at age 15 (*see below*). Youth shall also be enrolled in OYE by completing the FACES.net referral form for the Center for Keys for Life (CKL) program within 30 days of their 15th birthday.

Intensive transition planning shall begin when the youth has reached 17 years old. Transition planning for the youth shall include a series of Youth Transition Planning (YTP) meetings that involve team members who have been selected by the young adult in consultation with his or her assigned social worker. Team members shall include but not be limited to the following participants:

- The young adult
- His or her family members
- Community-based partners
- The CFSA consultative social worker (i.e., the independent living [IL] specialist)
- The youth's assigned CFSA or private agency social worker
- The assigned supervisor
- Other supportive or significant individuals identified by the young adult and his or her family

All YTP meeting agendas shall be structured to ensure that the young adults are currently receiving or will be made aware of resources that are most likely to equip them with the skills and maturity to make sound decisions for adult living.

PRE-TRANSITIONAL PLANNING PROCEDURES FOR YOUTH AGES 15 – 17

1. Ansell-Casey Life Skills Assessment

One of the assessment tools that CFSA uses to assist youth in preparing for young adulthood is the Ansell-Casey Life Skills Assessment (ACLSA), which every youth shall begin at 15 years old and must repeat annually. Based on the youth's initial assessment score, the assigned CFSA or private agency social worker shall team with the youth (and others) to develop a personalized learning plan that identifies areas of strength along with areas where additional learning may be beneficial to the youth's preparation for young adulthood. Learning plans may fold into other case planning components, including the youth's transitional plan. Specific services and training shall include but not be limited to the following life skill areas:

- a. Financial literacy and economic self-sufficiency
- b. Vocational selection and training
- c. Pursuit of post-secondary education
- d. Identification of affordable, safe, and stable housing options
- e. Self care, health education, and risk prevention
- f. Family support, positive interpersonal relationships, and healthy marriage education

2. Individual Transitional Independent Living Plans (ITILP)

The assigned social worker shall be responsible for helping youth to develop goals for transitioning from care. The ITILP (*see Attachment A*) shall reflect these goals, which may include permanency options, and be updated every 180 days (or more frequently, if needed). It shall include, but not be limited to the following ITILP components:

- a. A summary of life skills and other services that are or will be provided.
- b. A summary of the youth's educational and medical histories (including mental health and dental histories and plan).
- c. Youth's educational and/or vocational assessments (e.g., ACLSA) and resulting learning plan.
- d. Establishment of supports and resources to be provided to the youth.
- e. Discussion about the youth's current or future living arrangements (i.e., after the youth exits or ages out of the system).
- f. An estimated household budget (including sources and amount of income and assets).
- g. Health care insurance, including documentation of health care power-of-attorney and proxy (if applicable).
- h. Health education & risk prevention.
- i. Cultural characteristics.
- j. Permanency Pact (*see below*).
- k. Signatures of all participants on an attached service agreement.

3. Permanency Pact

Every youth shall have the opportunity to develop a pact with his or her life-long connection that reinforces a mutual commitment to achieving permanency. The pact also recognizes the fundamental importance of establishing supportive resources for ensuring successful independence. Individual Pacts shall address the following factors:

- a. Identification of a person (within the youth's immediate support system) with whom the youth can establish a relationship specifically supportive of their progress towards a successful transition from care.
- b. Identification of extended family members, mentors, coaches, faith-based and other community members who are willing to commit their support to the youth after he or she ages out of care.

TRANSITION PLANNING FOR YOUNG ADULTS AGES 17 – 21

1. Pre-Conference Orientation

The consultative social worker (i.e., IL specialist) shall convene a pre-conference orientation meeting on a quarterly basis. This is a required meeting for all CFSA youth who are 17 years of age. The orientation meeting shall incorporate the following agenda items:

- a. Discussion on what to expect during Youth Transition Planning (YTP) process
- b. Opportunity for the youth to express opinions, make suggestions, ask questions, etc.
- c. Presentations by youth who have gone through the process, including tips for successful transition plans
- d. Schedule of future activities

2. Youth Transition Planning (YTP) Meetings

The case-carrying social worker shall complete a transition checklist to help determine the young adult's current and future needs for a successful transition from care. In addition, the social worker shall organize a six-month progressive schedule of YTP meetings, the first of which shall be coordinated 30 days prior to the young adult turning **18 years** old. This initial meeting shall be coordinated by the case-carrying social worker and facilitated by the consultative social worker (i.e., the IL specialist). *Note: the consultative social worker may be invited to attend any future YTP meeting as needed.* The following agenda items shall be addressed at the initial YTP:

- a. Joint presentation of the case story by the young adult and the case-carrying social worker
- b. Review of the most recent learning plan (based on the Ansell-Casey assessment)
- c. Family Engagement
- d. Identification of strengths, challenges, and any concerns of the young adult related to his or her transition
- e. Discussion of support networks (e.g., family supports, adult adoption, Permanency Pact)
- f. Identification of additional resources
- g. Timeline of milestones
- h. Health care (including insurance, health care power-of-attorney and proxy documentation)
- i. Development of short and long-term vocational and/or educational goals
- j. Employment options
- k. Proposed future housing plan

Note: it is the responsibility of the case-carrying social worker to produce a type-written YTP plan (see Attachment B) and ensure that the plan has been distributed to all YTP team members within five business days of the meeting.

3. When the young adult turns **18 ½ years** old, the case-carrying social worker and the identified team members shall meet to review and update (as appropriate) the following items:
 - a. Updates to the initial transition plan
 - b. Updates regarding the completion of goals and tasks
4. At **19 years** old, the youth will meet with his or her transition team, including the consultative social worker. The case-carrying social worker shall facilitate the YTP meeting and ensure that the following agenda items are addressed:
 - a. Review of the most recent transition plan
 - b. Identification of current strengths and challenges
 - c. Identification and acknowledgement of recent accomplishments
 - d. Updated proposed housing plan
 - e. Updates regarding the completion of goals and tasks

5. At **19 ½ years** old, the young adult and his or her social worker shall again review the transition plan. Goals and tasks shall be updated and revised accordingly. This meeting shall be co-facilitated by the consultative social worker.
6. At **20 years** old, the young adult's YTP meeting shall follow the same agenda items as at age 19 (see *above*). The case-carrying *and* consultative social worker shall co-facilitate the meeting. At this time, the case-carrying social worker shall submit the after-care referral.
7. The case-carrying social worker shall schedule YTP meetings to review the transition plan and, update and/or revise goals and task as needed for the young adult at **20 ¼ years** and **20 ½ years**. The consultative social worker shall be present and co-facilitate these meetings.
8. Once the young adult turns **20 ¾ years** old, participants at his or her YTP team meeting shall include staff from the Office of the CFSA Director as well as the OYE management team. The case-carrying and consultative social workers shall again co-facilitate the meeting. The following activities shall be completed:
 - a. Review transition plan, including the following items:
 - i. Supportive resources (e.g., mentor, life-long connections, community supports, etc.)
 - ii. Education
 - iii. Employment services
 - iv. Housing options
 - v. Health insurance
 - vi. Health power-of-attorney and proxy
 - b. Review checklist
 - c. Identify strengths and challenges
 - d. Identify accomplishments
 - e. Finalize proposed housing plan
9. **Other Services Provided**

The consultative social worker (i.e., the independent living specialist) shall be responsible for ensuring completion of the following YTP activities:

 - a. Review of all YTP information.
 - b. With support from the case-carrying social worker, completion of exit interviews 45 days prior to the young adult's transition out of care.
 - c. Distribution of the Transition Care Package after completion of the exit interview.
 - d. Training for private providers.

10. Tracking

It is the responsibility of OYE to track and enter service data in the OYE database. The following services for youth (and/or other services as appropriate) shall be included in the tracking process:

- a. Independent living needs assessment
- b. Academic support
- c. Post-secondary educational support
- d. Career preparation
- e. Employment programs or vocational training
- f. Budget and financial management
- g. Housing education & home management training
- h. Health care insurance, including documentation of health care power-of-attorney and proxy (if applicable)
- i. Health education & risk prevention
- j. Family planning
- k. Mentoring
- l. Supervised independent living

Attachment A

Child and Family Services Agency



Youth Transition Planning Individual Transitional Independent Living Plan (ITILP) [DATE]

IDENTIFYING INFORMATION

1. Youth's Name: _____	2. Date of Birth: _____
3. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	4. FACES Client ID: _____
5. Permanency Goal: _____	
6. Youth's Current Placement Provider: _____	
7. Phone Number: _____	
7. Address: _____	
(Street)	(City)
(State)	(Zip)
8. Social Worker: _____ Supervisor: _____	

ASSESSMENT	Strengths	Needs
Physical		
Mental		
Emotional		
Academic		
Social		
Familial		
Recreational		
Life Skills		
Cultural		

OBJECTIVE	GOALS	TASKS	RESPONSIBLE PARTY	TIMEFRAME
Placement/Housing – Are there any current issues with the youth's placement?				
Financial – Does the youth have a savings/checking account? What, if any, is the youth's additional income Is the youth receiving budget training?				
Life Connections - Does the youth have regular contact with and support from family, extended family, and significant others? What services, supports and other interventions are needed to support the youth's connectedness and support? Does the youth have a visitation plan?				
Life Skills – Has the youth been referred to the Center of Keys for Life? Has the youth actively participated in the CKL activities? What are the plans for engaging the youth in active participation in the CKL?				

OBJECTIVE	GOALS	TASKS	RESPONSIBLE PARTY	TIMEFRAME
Educational/Vocational - Identify services, supports and interventions needed for the youth. Has the youth enrolled/completed high school? If the youth is in HS, what is the date of completion? Are there any barriers to completion of High School? If the youth plans to attend college or vocational school, identify supports (i.e. pre-college services) needed for the educational plan.				
Job Readiness – Does the youth have part-time or full-time employment? What services, supports, and other interventions are anticipated to support the youth in finding employment? Has the youth participated in the Summer Youth Employment Program? Has the youth been referred to DOES for job readiness training?				
Health (medical, dental, and vision) – Does the youth have health needs? Has the youth had a comprehensive physical (including dental and vision) within the past 12 months? If the youth is not parenting or pregnant, is there awareness around pregnancy prevention?				

ADDITIONAL COMMENTS

[illegible]

LIST OF PARTICIPANTS

I understand that while participating in the ITILP or other Youth Transition Planning (YTP) meeting, I may come into contact with confidential information regarding a CFSA client. I further understand that all information regarding clients that is maintained or collected by CFSA, particularly in the Child Protection Registry, is highly sensitive, confidential, and/or otherwise protected from disclosure to the public.

I understand and agree that I will not disclose any confidential information protected by applicable federal or District laws, or by CFSA's policies and procedures, nor will I use such information for unauthorized purposes.

In particular, I understand and agree that I will not disclose any of the following information:

- a) Information that is considered confidential pursuant to DC Official Code and in particular DC Code Section 4-1303.06, including but not limited to information that identifies individual children reported as or found to be abused or neglected, or information that identifies other members of their families or other persons or other individuals.
- b) Information that is considered confidential pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (Pub. L No 104-191, 110 Stat. 193 [1996]), including HIPAA's implementing regulations (45 CFR part 160 and part 164, subparts A and E).

I understand and agree that whoever willfully discloses, receives, makes use of or knowingly permits the use of confidential information concerning the youth or individual in violation of DC Code Official Code § 4-1303.06 is guilty of a misdemeanor and upon conviction shall be fined not more than \$1,000.00.

By signing this document, I acknowledge that I have read and fully understand the above statements.

Name	Relationship to Youth	Signature	Email Address	Date

Next Scheduled ITILP Conference: _____

Attachment B Child and Family Services Agency



YOUTH TRANSITION PLAN (YTP) [DATE]

IDENTIFYING INFORMATION

1. Youth Name: _____ 2. Date of Birth: _____ 3. Age: _____
4. Gender: _____ 5. FACES Child ID#: _____ 6. Social Security Number: _____
7. Permanency Goal: _____ 8. Concurrent Goal: _____
9. Youth's Current Placement Provider _____ Youth's Address: _____
- City: _____ State: _____ Zip Code: _____
10. Social Worker: _____ Phone: _____
11. Supervisor: _____ Phone: _____
12. Date of Transition Planning Conference _____ 13. Anticipated Date of Youth's Transition from Care _____
14. Reason for Transition: _____

OBJECTIVE	GOALS	TASKS	RESPONSIBLE PARTY	TIMEFRAME
Housing – Where is youth going to live? What are the necessary supports and services needed for the youth to get housing?				
Financial – What is the youth's earned income? What, if any, is the youth's additional income? What are the youth's monthly expenses?				
Life Connections - Does the youth have regular contact with and support from family, extended family, and significant others? What services, supports and other interventions are needed to support the youth's connectedness and support for transition to adulthood? Permanency Goal: Does the youth know and understand their current permanency goal? Has youth engaged in discussion concerning other permanency options?				
Crisis Management – Does the youth need assistance in know how to navigate public and private systems? Does the youth know who to contact for help navigating systems?				

OBJECTIVE	GOALS	TASKS	RESPONSIBLE PARTY	TIMEFRAME
Educational/Vocational - Identify services, supports and interventions needed for the youth, who has not completed high school or not attained GED. If the youth plans to attend college or vocational school, identify supports needed for the educational plan.				
Employment – Does the youth have part-time or full-time employment? What services, supports, and other interventions are anticipated to support the youth in finding employment?				
Health (medical, dental, and vision) – Does the youth have health insurance? Does the youth have health needs? Has the youth had a comprehensive physical (including dental and vision) within the past 12 months? Does the youth have a health care provider(s)?				
Emotional/Psychological - Identify the services, supports and other interventions necessary to meet the youth's mental health needs and the changes that are desired or anticipated in the youth's emotional well-being.				

OBJECTIVE	GOALS	TASKS	RESPONSIBLE PARTY	TIMEFRAME
Pregnant and Parenting Youth - Identify the parenting/pregnant youth's needs to successfully complete the pregnancy and/or to effectively raise and care for her/his children, keeping in mind any special services needed due to health or mental health issues.				
Other -				

Other -

ADDITIONAL COMMENTS

LIST OF PARTICIPANTS

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I understand and agree that I will not disclose any confidential information protected by applicable federal or District laws, or by CFSA's policies and procedures, nor will I use such information for unauthorized purposes.

In particular, I understand and agree that I will not disclose any of the following information:

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